

*Complain*

**CV 13 - 3312**

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT COURT OF NEW YORK

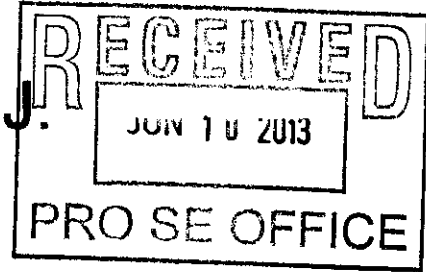
RENY RIVERO

Plaintiff,  
v.

**VITALIANO, J.**

Chase Receivables.

Defendant(s),



**DEMAND FOR JURY TRIAL**

1. This is an action for actual and statutory damages brought by Plaintiff RENY RIVERO, an individual consumer, for violations of the Fair Debt Collection Practices Act, 15 U.S.C. § 1692 et seq. (hereinafter "FDCPA"). In addition, NYC DCA LOCAL LAW 15. Every one of this laws prohibits debt collectors from engaging in abusive, deceptive, and unfair practices.

**II PRELIMINARY STATEMENT**

2. Plaintiff contends that the Collection Company Defendant has violated such laws by repeatedly harassing Plaintiff in attempts to collect alleged but nonexistent debt.

**III JURISDICTION AND VENUE**

3. Jurisdiction of this court arises under 15 U.S.C. §1692k(d), 28 U.S.C. §§ 1331, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367. Venue lies in this district pursuant to 28 U.S.C. §1391(b).

4. This is an action for damages which do not exceed \$75,000.00.

**IV PARTIES**

5. Plaintiff, RENY RIVERO, is a natural person, consumer, and an "alleged" debtor residing in 131 Silver lake Road # 406, Staten Island, NY 10301.

6. Plaintiff is a consumer as defined by the FDCPA, 15 U.S.C. § 1692a(3), by NYC LOCAL LAW 15 § 20-

489(c).

7. Upon information and belief Defendant, Chase Receivables, is a Firm Debt Collection Agency. The Defendant appears to be an authorized New York as a "ASSUNED NAME" of the "Credit Bureau of Napa County, Inc." to do business in New York State. The Defendant does not appear to be a NYC DCA authorized Licensed. Principal place of business is located 1247 Broadway., Sonoma, CA 95476.

8. The principal purpose of Defendant is the collection of debts (as defined on 15 U.S.C. § 1692a(5)) in this state and defendant regularly attempts to collect debts alleged to be due another like from Plaintiff, as defined by 15 U.S.C. § 1692a(6).

**9. The "defendant" is as per LOCAL LAW 15 § 20-489 (a). "Debt collection agency" shall mean a person engaged in business the principal purpose of which is to regularly collect or attempt to collect debts owed or due or asserted to be owed or due to another."**

**10. The term "debt" as per LOCAL LAW 15 § 20-489(d). "Means any obligation or alleged obligation of a consumer to pay money arising out of a transaction in which the money, property, insurance, or services which are the subject of the transaction are primarily for personal, family, or household purposes, whether or not such obligation has been reduced to judgment, or any obligation or alleged obligation arising out of a judgment or valid agreement for the payment of child support."**

## **V. FACTUAL ALLEGATIONS**

11. Defendant does not appear as an authorized or licensed business by The New York department of state and The New York Department of Consumer Affairs. See Exhibit A and B.

12. Plaintiff has no prior or present established relationship with the Defendant Chase Receivables.

13. Plaintiff has never given any Defendant express permission to call Plaintiff's cellular phone.

14. Plaintiff has no contractual obligation to pay Defendant Chase Receivables.

15. Sometimes in July 2011, the Plaintiff received a bill for \$10.50 for copies from Richmond University Medical Center (RUMC) of hospital treatment made by HealthPort.

16. Plaintiff called HeathPort asking it why he is being billed \$10.50.

17. Plaintiff stated that he will pay when he receives all the copies in perfect and clear presentation.

18. On about the third week of June 2012, the Plaintiff received a NOTICE OF VALIDATION from Chase Receivables dated 06-11-2012. See EXHIBIT C.

19. The Notice of Validation did not legally explain how the defendant is trying to collect an alleged personal debt of \$12.23 rather of the \$10.50 as HealthPort alleged balance is.

20. The difference of \$1.73 has not been shown nor explain nor demanded on any statement sent to the Plaintiff by HealthPort.

21. The defendant did not include the name of the person to call back on the notice of validation.

22. The defendant, Chase Receivables, on NOTICE OF VALIDATION DATED 06-11-2012, asserted a right which it lacks, to wit, the right to enforce a debt.

23. On June 29th, the Plaintiff prepared a letter of validation and mailed on 07-03-12.

24. See Exhibit D for Letter of Validation, Notice of Validation, USPS payment receipt, USPS CERTIFICATE OF MAIL receipt, and USPS.com tracking history.

25. The defendant, Chase Receivables answered to the Letter of Validation.

26. His answer included 2 statement pages, a copy of my letter of validation, a copy of the notice of validation, and the forms used to get copies of hospital treatment records, at RMUC. See EXHIBIT E:

27. The defendant still does not explain how legally he is trying to collect alleged balance \$12.23 even though HealthPort on all his statements that alleged balance is \$10.50.

28. The defendant did not include the name of the person to call back on the incomplete Validation of the alleged debt.

29. The defendant has not validate the debt.

30. During the 2nd week of September, The Plaintiff received a complete and in good condition copies of the RUMC hospital treatment record.

31. On 09-10-2012, The Plaintiff went to HealthPort web site, introduced his personal information, invoice # 0109311797 , his name and got the invoice balance of \$10.50 which he paid. See Exhibit F.
32. On 09-09-2012. The Plaintiff received email confirmation from HeathPort that payment for \$10.50 has been received and balance remains outstanding. See Exhibit G.
33. On 06-10-2012, a representative from NYC DCA confirmed that Chase Receivables was not licensed as a Debt Collection Agency to collection activities in NYC by phone.

**COUNT I**  
**VIOLATION OF FAIR DEBT COLLECTION PRACTICES ACT (FDCPA), 15 U.S.C.**  
**§1692e(10) BY DEFENDANT CHASE RECEIVABLES**

34. Plaintiff alleges and incorporates the information in paragraphs 1 through 33.
35. Defendants Chase Receivables violated 15 U.S.C. §1692e(10) by the use of a false representation or deceptive means to collect or attempt to collect a debt or to obtain information concerning a consumer.
36. 15 U.S.C. §1692e(10) states in part;

A debt collector may not use any false, deceptive, or misleading representation or means in connection with the collection of any debt. Without limiting the general application of the foregoing, the following conduct is a violation of this section:

- (10) The use of any false representation or deceptive means to collect or attempt to collect any debt or to obtain information concerning a consumer.

**WHEREFORE**, Plaintiff demands judgment for damages against Chase Receivables for actual, statutory, and punitive damages, attorney's fees and costs, pursuant to 15 U.S.C. §1692.

**COUNT II**

**OTHER VIOLATION OF FAIR DEBT COLLECTION PRACTICES ACT (FDCPA), 15 U.S.C. §1692 BY DEFENDANT CHASE RECEIVABLES**

37. Plaintiff alleges and incorporates the information in paragraphs 1 through 36.
38. § 1692 g Failure to send the consumer a 30-day validation notice within five days of the initial communication.
38. § 1692 g(a)(1) Must state Amount of Debt.
39. § 1692 g(B) Collector must cease collection efforts until debt is validated.

**WHEREFORE**, Plaintiff demands judgment for damages against Chase Receivables for actual, statutory, and punitive damages, attorney's fees and costs, pursuant to 15 U.S.C. §1692.

**COUNT III**

**VIOLATION OF FAIR DEBT COLLECTION PRACTICES ACT (FDCPA), Collector cannot falsely represent character, amount or legal status of debt 15 U.S.C. § 1692e(2)(A).**

40. Plaintiff alleges and incorporates the information in paragraphs 1 through 39.

**WHEREFORE**, Plaintiff demands judgment for damages against Chase Receivables for actual, statutory, and punitive damages, attorney's fees and costs, pursuant to 15 U.S.C. §1692.

**COUNT IV**

**VIOLATIONS OF LOCAL LAW 15 §5-77 Unconscionable and Deceptive Trade Practices (f) Validation of debts. BY DEFENDANT CHASE RECEIVABLES**

41. Plaintiff alleges and incorporates the information in paragraphs 1 through 40.
42. (f) *Validation of debts.* (1)  
Within five days of any further attempt by the creditor itself to collect the debt, it shall send the customer a written notice containing:
43. (i) the amount of the debt;
44. (iii) a statement that, if the consumer notifies the debt collector in writing within the thirty-day period at the address designated by the debt collector in the notice, that the debt, or any portion thereof is disputed, the debt collector shall either:

45. (A) make appropriate corrections in the account and transmit to the consumer notification of such corrections and an explanation of any change and, if the consumer so requests, copies of documentary evidence of the consumer's indebtedness; or

46.(B) send a written explanation or clarification to the consumer, after having conducted an investigation, setting forth to the extent applicable the reason why the creditor believes the account of the consumer was correctly shown in the written notice required by §5-77(f)(1) and, upon the consumer's request, provide copies of documentary evidence of the consumer's indebtedness. In the case of a billing error where the consumer alleges that the creditor's billing statement reflects goods not delivered in accordance with the agreement made at the time of the transaction, a creditor may not construe such amount to be correctly shown unless it determines that such goods were actually delivered, mailed, or otherwise sent to the consumer and provides the consumer with a statement of such determination.

47. (2) Within five days after the initial communication with a consumer in connection with the collection of any debt, a debt collector who is not a creditor and not employed by a creditor shall, unless the following information is contained in an initial written communication, or the consumer has paid the debt, send the consumer a written notice containing:

48.(i) the amount of the debt;

49.(3) If, pursuant to §§5-77(f)(1) or 5-77(f)(2) of this Regulation the consumer notifies the debt collector in writing within the thirty-day period that the debt, or any portion thereof, is disputed, or that the consumer requests the name and address of the original creditor, the debt collector shall not attempt to collect the amount in dispute until the debt collector obtains and mails to the consumer verification of the debt or a copy of the judgment or the name and address of the original creditor.

The debt collector shall maintain for one year from the date the notice was mailed, records containing documentation of the date such notice was mailed, the date the response, if any, was received and any action taken following such response.

50. § 20-494 Penalties. a. Any person who, after notice and hearing shall be found guilty of violating any provision of this subchapter, shall be punished in accordance with the provisions of chapter one of this title and shall be subject to a penalty of not less than seven hundred dollars nor more than one thousand dollars for each violation.

51. b. In addition to any other penalties, if a person is found to have committed repeated, multiple or persistent violations of any provision of this subchapter, such person may be responsible for the cost of the department's investigation.

**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367.

**COUNT V**

**VIOLATIONS OF LOCAL LAW 15 §5-77 Unconscionable and Deceptive Trade Practices (g) Liability. BY DEFENDANT CHASE RECEIVABLES**

52. Plaintiff alleges and incorporates the information in paragraphs 1 through 51.

53. (g) *Liability*. The employer of a debt collector is liable for the debt collector's violation of §5-77. A debt collector who is employed by another to collect or attempt to collect debts shall not be held liable for violation of §5-77.

54. § 20-494 Penalties. a. Any person who, after notice and hearing shall be found guilty of violating any provision of this subchapter, shall be punished in accordance with the provisions of chapter one of this title and shall be subject to a penalty of not less than seven hundred dollars nor more than one thousand dollars for each violation.

b. In addition to any other penalties, if a person is found to have committed repeated, multiple or persistent violations of any provision of this subchapter, such person may be responsible for the cost of the department's investigation.

**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367.

**COUNT VI**

**VIOLATIONS OF LOCAL LAW 15 §5-77 Unconscionable and Deceptive Trade Practices (b) Communication in connection with debt collection. A debt collector, in connection with the collection of a debt, shall not:. BY DEFENDANT CHASE RECEIVABLES**

55. Plaintiff alleges and incorporates the information in paragraphs 1 through 54.

55. (1) After institution of debt collection procedures, without the prior written consent of the consumer given directly to the debt collector after the institution of debt collection procedures, or without permission of a court of competent jurisdiction, communicate with the consumer in connection with the collection of any debt;

56. (4) After institution of debt collection procedures, communicate with a consumer with respect to a debt if the consumer has notified the debt collector in writing that the consumer wishes the debt collector to cease further communication with the consumer



with respect to that debt, except that any communication which is required by law or chosen from among alternatives of which one is required by law is not hereby prohibited.

**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367.

**COUNT VII**

**VIOLATIONS OF LOCAL LAW 15 §5-77 Unconscionable and Deceptive Trade Practices (c) Harassment or abuse.** A debt collector, in connection with the collection of a debt, shall not engage in conduct the natural consequence of which is to harass, oppress or abuse any person in connection with a debt. Such conduct includes: **BY DEFENDANT CHASE RECEIVABLES**

57. Plaintiff alleges and incorporates the information in paragraphs 1 through 56.

**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367..

**COUNT VIII**

**VIOLATIONS OF LOCAL LAW 15 §5-77 Unconscionable and Deceptive Trade Practices ((e) Unfair practices.** A debt collector may not use any unfair or unconscionable means to collect or attempt to collect a debt. Such conduct includes: **BY DEFENDANT CHASE RECEIVABLES**

58. Plaintiff alleges and incorporates the information in paragraphs 1 through 57.

59. (1) the collection of any amount (including any interest, fee, charge, or expense incidental to the principal obligation) unless such amount is expressly authorized by the agreement creating the debt or permitted by law;

**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367.

**COUNT VIII**

**VIOLATIONS OF LOCAL LAW 15 §20-489(a)** of the administrative code of the city of New York is amended to required NYC DCA LICENSE to the debt collection agency.

60. Plaintiff alleges and incorporates the information in paragraphs 1 through 59.

61. THE defendant **CHASE RECEIVABLES** does not have a license #.



**WHEREFORE**, Plaintiff demands judgment for damages against **CHASE RECEIVABLES** for actual, statutory, and punitive damages, attorney's fees and costs, and supplemental jurisdiction exists for the state law claims pursuant to 28 U.S.C. §1367.

**I, Reny Rivero, declare under the penalty of perjury under the laws of the State of New York, that the foregoing is true and correct to the best of my personal knowledge and recollection.**

**DEMAND FOR JURY TRIAL**

**Plaintiff hereby demands a trial by jury of all issues so triable as a matter of law.**

**Respectfully submit this June 10th of 2013.**

A handwritten signature in black ink, appearing to read 'Reny Rivero', is written over a horizontal line.

RENY RIVERO  
131 Silver Lake Road # 406  
Staten Island, NY 10301  
646-545-7135, 718-877-1333, 718-815-5712  
email clark0z1@yahoo.com

## **EXHIBIT A: NY DEPARTMENT OF STATE**

# NYS Department of State

## Division of Corporations

### Informational Message

The information contained in this database is current through June 7, 2013.

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No business entities were found for chase receivables.

Please refine your search criteria.

To continue please do the following:

Tab to Ok and press the Enter key or Click Ok.

Ok

[Services/Programs](#) | [Privacy Policy](#) | [Accessibility Policy](#) | [Disclaimer](#) | [Return to DOS](#)  
[Homepage](#) | [Contact Us](#)

EXHIBIT B: NYC DCA

[Search](#) | [Email Updates](#) | [Contact Us](#)**Department of  
Consumer Affairs****RESULTS:**

Industry: DEBT COLLECTION AGENCY Business/Individual Name: chase receivables ZIP Code: "" License Number: ""

[New Search](#)

Sorry, no records matched your search entry(ies). Please refer to **Search Tips** for assistance.

**Reminder:**

- Instant License Check is updated daily.
- Some legally operating sidewalk cafés and newsstands may *not* appear in Instant License Check during the license review process which includes public hearings and other City approvals.
- Sightseeing guides and temporary amusement devices are *not* included in Instant License Check currently. You can download lists of [licensed sightseeing guides](#) and [temporary amusement devices](#) in PDF.

Call 311 (212-NEW-YORK outside NYC) during business hours and ask to be transferred to DCA to learn more about a business's license status.

## **EXHIBIT C: NOTICE OF VALIDATION**

P.O. Box 157  
Hawthorne, NY 10532



PERSONAL & CONFIDENTIAL

**CHASE RECEIVABLES**  
1247 Broadway  
Sonoma, CA 95476  
A Professional Collection Agency  
(866) 855-3970

Address Service Requested

#BWNFTZF #CHRE83851206087#



RENY RIVERO 06061250-0091592926  
131 SILVER LAKE ROAD  
APT 406  
STATEN ISLAND, NY 10301-2741

June 11, 2012

**RE: HEALTHPORT**  
0091592926

**Chase# 06061250**

**TOTAL BALANCE: \$12.23**

Our client, HEALTHPORT, has asked Chase Receivables to contact you to find out if there is a problem regarding your bill. At this time, HEALTHPORT has no record of receiving payment from you.

Often an unpaid bill is nothing more than a misunderstanding or sometimes the result of the bill having been lost or forgotten. Though we are a collection agency and our business is to collect unpaid bills, we are also in the business of helping work out problems that occasionally arise between companies and their customers. We would very much like to help you resolve this issue.

HEALTHPORT, has informed us that you have an outstanding balance in the amount of \$12.23. This bill represents fees incurred for retrieving medical records that you requested. To make a payment, please use one of the convenient payment options listed at the bottom of this correspondence. If you believe that there is a problem with your account you may contact us at the number listed below.

You can go through our Automated System to submit a Credit Card payment by calling (866) 483-8183. If you would like to submit a dispute, you can go to [WWW.CHASEREC.COM](http://WWW.CHASEREC.COM).

We appreciate your prompt response to this letter.

Sincerely,  
Chase Receivables  
(866) 855-3970

THIS COMMUNICATION IS FROM A DEBT COLLECTOR. THIS IS AN ATTEMPT TO COLLECT A DEBT AND ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

UNLESS YOU NOTIFY THIS OFFICE WITHIN 30 DAYS AFTER RECEIVING THIS NOTICE THAT YOU DISPUTE THE VALIDITY OF THIS DEBT OR ANY PORTION THEREOF, THIS OFFICE WILL ASSUME THIS DEBT IS VALID. IF YOU NOTIFY THIS OFFICE IN WRITING WITHIN 30 DAYS AFTER RECEIVING THIS NOTICE THAT YOU DISPUTE THE VALIDITY OF THIS DEBT OR ANY PORTION OF IT, THIS OFFICE WILL OBTAIN VERIFICATION OF THE DEBT OR OBTAIN A COPY OF A JUDGMENT AND MAIL YOU A COPY OF SUCH JUDGMENT OR VERIFICATION. IF YOU REQUEST OF THIS OFFICE IN WRITING WITHIN 30 DAYS AFTER RECEIVING THIS NOTICE THIS OFFICE WILL PROVIDE YOU WITH THE NAME AND ADDRESS OF THE ORIGINAL CREDITOR, IF DIFFERENT FROM THE CURRENT CREDITOR.

**PLEASE SEE REVERSE SIDE FOR IMPORTANT INFORMATION.**

DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT.

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

**PAY ON LINE [www.chaseres.com/paymethod.php](http://www.chaseres.com/paymethod.php)**

**TO ACCESS YOUR ACCOUNT ONLINE USE THE FOLLOWING PIN# 44926**

Payment Methods Available: Credit Card, Electronic Payments over the phone, Post-Dated Electronic Payments, Money Orders, Certified Checks, Western Union-(City Code=Chase Receivables, Score CA.)

HEALTHPORT

Chase# 06061250-EA  
CHASE RECEIVABLES  
P.O. Box 157  
Hawthorne, NY 10532

RENY RIVERO  
131 SILVER LAKE ROAD  
APT 406  
STATEN ISLAND, NY 10301-2741

AMOUNT: \$12.23



EXHIBIT D.

FOR LETTER OF VALIDATION,

NOTICE OF VALIDATION,

USPS PAYMENT RECEIPT,

USPS CERTIFICATE OF MAIL RECEIPT,

AND USPS.COM TRACKING HISTORY

Reny Rivero  
131 Silver Lake Road # 406  
Staten Island, NY 10301

Date: June 29, 2012

Chase Receivables  
1247 Broadway  
Sonoma, CA 95476

Re: Acct Ref. Creditor Healthport # 06061250 and All or any alleged DEBTS.

To Whom It May Concern:

This letter is being sent to you in response to a alleged debt. Be advised that this is not a refusal to pay, but a notice sent pursuant to the Fair Debt Collection Practices Act, 15 USC 1692g Sec. 809 (b). In addition to New York City Local law 15, § 2-190(a) and (b), § 20-493.2 (a), § 20-493.2 (a)(1) and (2) that your claim is disputed and validation is requested.

This is NOT a request for verification or proof of my mailing address, but a request for VALIDATION made pursuant to the above named Titles and Sections. I respectfully request that your offices provide me with competent evidence that I have any legal obligation to pay you

What I need you to provide as the debt validation is as follows:

1. What the money you say I owe is for;
2. Explain and show me how you calculated what you say I owe;
3. Provide me with copies of any papers that show I agreed to pay what you say I owe;
4. Provide a verification or copy of any judgment if applicable;
5. Identify the original creditor;
6. Prove the Statute of Limitations has not expired on this account
7. Show me that you are licensed to collect in my state
8. Provide me with your license numbers and Registered Agent
9. Proof that the collection company owns the debt/or has been assigned the debt. (You are legally entitled to collect this particular debt from me.) This is basic contract law.
10. Complete payment history, starting with the original creditor. (I need to have proof of my payment history with original Creditor, what the amount of the debt was when the creditor assigned the debt to your company, and what fees/interest has been tacked on to this debt and how you/they determined these fees.) This requirement was established by the case Fields v. Wilber Law Firm, Donald L. Wilber and Kenneth Wilber, USCA-02-C-0072, 7th Circuit Court, Sept 2004..
11. Copy of the original signed loan agreement or credit card application. (My contract with the original creditor establishing the debt between us.) This is also basic contract law.

At this time I will also inform you that if your offices have reported invalidated information to any of the 3 major Credit Bureau's (Equifax, Experian or TransUnion) this action might constitute fraud under both Federal and State Laws. Due to this fact, if any negative mark is found on any of my credit reports by your company or the company that you represent

I will not hesitate in bringing legal action against you for the following:

1. Violation of the Fair Credit Reporting Act
2. Violation of the Fair Debt Collection Practices Act
3. Defamation of Character

If your offices are able to provide the proper documentation as requested in the following declaration, I will require at least 30 days investigating this information and during such time all collection activity must cease and desist.

Also during this validation period, if any action is taken which could be considered detrimental to any of my credit reports, I will consult with my legal counsel for suit. This includes any listing any information to a credit reporting repository that could be inaccurate or invalidated or verifying an account as accurate when in fact there is no provided proof that it is.

If your offices fail to respond to this validation request within 30 days from the date of your receipt, all references to this account must be deleted and completely removed from my credit file and a copy of such deletion request shall be sent to me immediately.

I would also like to request, in writing, that no telephone contact be made by your offices to my home or to my place of employment. If your offices attempt telephone communication with me, including but not limited to computer generated calls and calls or correspondence sent to or with any third parties, it will be considered harassment and I will have no choice but to file suit. All future communications with me MUST be limited to what the law allows you, Any needed and legal communication must be done in writing and sent to the address noted in this letter by USPS.

It would be advisable that you assure that your records are in order before I am forced to take legal action.

Best Regards,

A handwritten signature in black ink, appearing to read 'Henry Rivero', written over a circular stamp or seal.

Henry Rivero

P.O. Box 157  
Hawthorne, NY 10532

PERSONAL & CONFIDENTIAL

**CHASE RECEIVABLES**  
1247 Broadway  
Sonoma, CA 95476  
A Professional Collection Agency  
(866) 855-3970

**Address Service Requested**

#BWNFTZF #CHRE83851206087#

\_\_\_\_\_

REN Y RIVERO 08061250-0091592926  
131 SILVER LAKE ROAD  
APT 406  
STATEN ISLAND, NY 10301-2741

**June 11, 2012**

RE: HEALTHPORT  
0091592926

**Chase# 08081250**  
**TOTAL BALANCE: \$12.23**

**Our client, HEALTHPORT, has asked Chase Receivables to contact you to find out if there is a problem regarding your bill. At this time, HEALTHPORT has no record of receiving payment from you.**

Often an unpaid bill is nothing more than a misunderstanding or sometimes the result of the bill having been lost or forgotten. Though we are a collection agency and our business is to collect unpaid bills, we are also in the business of helping work out problems that occasionally arise between companies and their customers. We would very much like to help you resolve this issue.

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**You can go through our Automated System to submit a Credit Card payment by calling (888) 483-6163. If you would like to submit a dispute, you can go to [WWW.CHASEREC.COM](http://WWW.CHASEREC.COM).**

**We appreciate your prompt response to this letter.**

**Sincerely,**  
**Chase Receivables**  
**(866) 855-3970**

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**PLEASE SEE REVERSE SIDE FOR IMPORTANT INFORMATION.**

**DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT.**

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

**PAY ON LINE [www.chesrec.com/paymethod.php](http://www.chesrec.com/paymethod.php)**

TO ACCESS YOUR ACCOUNT ONLINE USE THE FOLLOWING PIN# 44926

**Payment Methods Available:** Credit Card, Electronic Payments over the phone, Post-Dated Electronic Payments, Money Orders, Certified Checks, Western Union-(City Code=Chase Receivables, Score CA.)

## HEALTHPORT

Chase# 06061250-EA  
CHASE RECEIVABLES  
P.O. Box 157  
Hawthorne, NY 10532

RENY RIVERO  
131 SILVER LAKE ROAD  
APT 406  
STATEN ISLAND, NY 10301-2741

**AMOUNT: \$12.23**

WEST NEW BRIGHTON STATION  
 Staten Island, New York  
 103109997  
 3568880518-0099  
 07/03/2012 (800)275-6777 02:48:53 PM

Sales Receipt  
 Product Sale Unit Final  
 Description Qty Price Price

COMMACK NY 11725 \$0.65  
 Zone-1 First-Class  
 Letter

1.00 oz.

Expected Delivery: Fri 07/06/12

Return Rpt (Green \$2.35  
 Card)

Certified \$2.95

Label #: 70093410000189824590

Issue PVI: \$5.95

SANOMA CA 95476 \$0.45

Zone-8 First-Class

Letter

1.00 oz.

Expected Delivery: Sat 07/07/12

Return Rpt (Green \$2.35  
 Card)

Certified \$2.95

Label #: 70093410000189824545

Issue PVI: \$5.75

Total: \$11.70

Paid by:

Cash \$20.00

Change Due: -\$8.30

Order stamps at usps.com/shop or  
 call 1-800-Stamp24. Go to  
 usps.com/clickship to print  
 shipping labels with postage. For  
 other information call  
 1-800-4USPS.

\*\*\*\*\*

7009 3410 0001 8982 4545

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 (Domestic Mail Only. No Insurance Coverage Provided)  
 For delivery information visit our website at www.usps.com

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Sanoma CA 95476

Postage	\$ 10.45	0518 03 Postmark Here
Certified Fee	\$2.95	
Return Receipt Fee (Endorsement Required)	\$2.35	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 15.75	

07/03/2012

Sent to CHASE Receivables  
 Street, Apt. No.,  
 or PO Box No. 1247 Broadway  
 City, State, ZIP+4®  
Sanoma, CA 95476

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YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
70093410000189824545	First-Class Mail®	Delivered	July 06, 2012, 8:29 am	SONOMA, CA 95476	Expected Delivery By: July 6, 2012 Certified Mail™ Return Receipt
		Notice Left	July 06, 2012, 7:40 am	SONOMA, CA 95476	
		Arrival at Unit	July 06, 2012, 7:36 am	SONOMA, CA 95476	
		Processed at USPS Origin Sort Facility	July 05, 2012, 10:49 pm	PETALUMA, CA 94954	
		Dispatched to Sort Facility	July 03, 2012, 5:02 pm	STATEN ISLAND, NY 10310	
		Acceptance	July 03, 2012, 2:48 pm	STATEN ISLAND, NY 10310	

Check on Another Item

What's your label (or receipt) number?



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  - Terms of Use >
  - FOIA >
  - No FEAR Act EEO Data >
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- OTHER USPS SITES

  - Business Customer Gateway >
  - Postal Inspectors >
  - Inspector General >
  - Postal Explorer >

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EXHIBIT E  
VALIDATION ANSWER LETTER  
FROM CHASE RECEIVABLES ,  
ITEMIZATION 2 PAGES COPY,  
MY VALIDATION LETTER,  
THEIR NOTICE OF  
VALIDATION, STATEMENT  
FROM HEALTH PORT WITH  
\$12.23, MY APPLICATION FOR  
HOSPITAL  
TREATMENT RECORDS.



\* CHASE RECEIVABLES \*  
1247 BROADWAY

SONOMA CA, 95476  
PHONE: 800-540-7336

JUL 6, 2012 10:50

ACCOUNT ITEMIZATION

---

RENY RIVERO  
131 SILVER LAKE ROAD  
APT 406  
STATEN ISLAND, NY 10301

---

<FOLD HERE>

THE FOLLOWING IS AN ITEMIZATION OF YOUR ACCOUNTS AS OF JUL 6, 2012 .  
PLEASE RETAIN THIS COPY FOR YOUR RECORDS. FOR YOUR CONVENIENCE WE HAVE  
INCLUDED ALL INTEREST PAID LAST YEAR AND THIS CURRENT YEAR TO DATE.

N O T I C E THE FEDERAL LAW REQUIRES WE INFORM YOU THAT THIS IS AN ATTEMPT  
BY A DEBT COLLECTOR TO COLLECT A DEBT.  
ANY INFORMATION OBTAINED WILL BE USED FOR THAT PURPOSE.

## ITEMIZATION CONTINUED

SINGLE ACCOUNT: RIVERO , RENY

JUL 6, 2012

DESK: 69

ACCOUNT #: 6061250 CLIENT DEBTOR #: 0091592926

DESK: 69

OUR CLIENT NAME: HEALTHPORT

FOR:

INTEREST AT: 0% FROM DATE OF REFERRAL

DATE OF REFERRAL: 06/07/12

DATE OF SERVICE: 06/08/11

DATE OF LAST PMT:

AMOUNT REFERRED:	\$	12.23
PRINCIPAL BALANCE:	\$	12.23
ACCUMULATED INTEREST:	\$	0.00
OTHER CHARGES:	\$	0.00
COURT COSTS:	\$	0.00
ATTORNEY FEES:	\$	0.00
OTHER:	\$	0.00
INTEREST:	\$	0.00

## DETAIL OF OTHER CHARGES

FEES	\$	0.00
------	----	------

PROCESS FEES	\$	0.00
--------------	----	------

ACC'T BAL: \$ 12.23

## PAYMENT TRANSACTION HISTORY

TYPE	DATE	PAYMENT AMOUNT	PAID ON PRINCIPAL	PAID ON INTEREST	PAID ON OTHER CHGS	PAID ON COURT COST	PAID ON ATTY FEES	PAID ON OTHER
------	------	-------------------	----------------------	---------------------	-----------------------	-----------------------	----------------------	------------------

\*NO PAYMENTS THIS ACCOUNT\*

GRAND TOTAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL DUE ON ALL ACCOUNTS				12.23				
TOTAL INTEREST PAID FOR 2011				0.00				
TOTAL INTEREST PAID TO DATE FOR 2012				0.00				

06061250

Reny Rivero  
131 Silver Lake Road # 406  
Staten Island, NY 10301

Date: June 29, 2012

Chase Receivables  
1247 Broadway  
Sonoma, CA 95476

Re: Acct Ref. Creditor Healthport # 06061250 and All or any alleged DEBTS.

To Whom It May Concern:

This letter is being sent to you in response to a alleged debt. Be advised that this is not a refusal to pay, but a notice sent pursuant to the Fair Debt Collection Practices Act, 15 USC 1692g Sec. 809 (b). In addition to New York City Local law 15, § 2-190(a) and (b), § 20-493.2 (a), § 20-493.2 (a)(1) and (2) that your claim is disputed and validation is requested.

This is NOT a request for verification or proof of my mailing address, but a request for VALIDATION made pursuant to the above named Titles and Sections. I respectfully request that your offices provide me with competent evidence that I have any legal obligation to pay you

What I need you to provide as the debt validation is as follows:

1. What the money you say I owe is for;
2. Explain and show me how you calculated what you say I owe;
3. Provide me with copies of any papers that show I agreed to pay what you say I owe;
4. Provide a verification or copy of any judgment if applicable;
5. Identify the original creditor;
6. Prove the Statute of Limitations has not expired on this account
7. Show me that you are licensed to collect in my state
8. Provide me with your license numbers and Registered Agent
9. Proof that the collection company owns the debt/or has been assigned the debt. (You are legally entitled to collect this particular debt from me.) This is basic contract law.
10. Complete payment history, starting with the original creditor. (I need to have proof of my payment history with original Creditor, what the amount of the debt was when the creditor assigned the debt to your company, and what fees/interest has been tacked on to this debt and how you/they determined these fees.) This requirement was established by the case Fields v. Wilber Law Firm, Donald L. Wilber and Kenneth Wilber, USCA-02-C-0072, 7th Circuit Court, Sept 2004..
11. Copy of the original signed loan agreement or credit card application. (My contract with the original creditor establishing the debt between us.) This is also basic contract law.

At this time I will also inform you that if your offices have reported invalidated information to any of the 3 major Credit Bureau's (Equifax, Experian or TransUnion) this action might constitute fraud under both Federal and State Laws. Due to this fact, if any negative mark is found on any of my credit reports by your company or the company that you represent

I will not hesitate in bringing legal action against you for the following:

1. Violation of the Fair Credit Reporting Act
2. Violation of the Fair Debt Collection Practices Act
3. Defamation of Character

If your offices are able to provide the proper documentation as requested in the following declaration, I will require at least 30 days investigating this information and during such time all collection activity must cease and desist.

Also during this validation period, if any action is taken which could be considered detrimental to any of my credit reports, I will consult with my legal counsel for suit. This includes any listing any information to a credit reporting repository that could be inaccurate or invalidated or verifying an account as accurate when in fact there is no provided proof that it is.

If your offices fail to respond to this validation request within 30 days from the date of your receipt, all references to this account must be deleted and completely removed from my credit file and a copy of such deletion request shall be sent to me immediately.

I would also like to request, in writing, that no telephone contact be made by your offices to my home or to my place of employment. If your offices attempt telephone communication with me, including but not limited to computer generated calls and calls or correspondence sent to or with any third parties, it will be considered harassment and I will have no choice but to file suit. All future communications with me MUST be limited to what the law allows you, Any needed and legal communication must be done in writing and sent to the address noted in this letter by USPS.

It would be advisable that you assure that your records are in order before I am forced to take legal action.

Best Regards,



Henry Rivero



HealthPort  
P.O. Box 409900  
Atlanta, GA 30384-9900  
Fed Tax ID 58 - 2659941  
1-877-595-9900



Invoice #: 0091592926  
Date: 6/8/2011

## Ship to:

Reny Rivero  
Reny Rivero  
131 Silver Lake Road Apt 406  
Staten Island, NY 10301

## Bill to:

Reny Rivero  
Reny Rivero  
131 Silver Lake Road Apt 406  
Staten Island, NY 10301

## Records from:

RICHMOND UNIVERSITY MED CENTER  
355 BARD AVENUE  
STATEN ISLAND, NY 10310

Requested By: RENY RIVERO  
Patient Name: RIVERO RENY

DOB: 02142007  
SSN: \*\*\* \*\* \*\*\*\*\*  
875762

Description	Quantity	Unit Price	Amount
Please refer to the insert included with this invoice for more information about HealthPort or the charges incurred.			
<b>PLEASE REMIT PAYMENT</b>			
Basic Fee			0.00
Retrieval Fee			0.00
Per Page Copy (Paper) 1	14	0.75	10.50
Shipping/Handling			1.73
Subtotal			12.23
Sales Tax			0.00
Invoice Total			12.23
Balance Due			12.23
Pay your invoice online at <a href="http://www.HealthPortPay.com">www.HealthPortPay.com</a>			
Terms: Net 30 days		Please remit this amount : \$ 12.23 (USD)	

HealthPort  
P.O. Box 409900  
Atlanta, GA 30384-9900  
Fed Tax ID 58 - 2659941  
1-877-595-9900

Invoice #: 0091592926

Check # \_\_\_\_\_  
Payment Amount \$ \_\_\_\_\_

**Please return stub with payment.**

Please include invoice number on check.

To pay invoice online, please go to <http://www.HealthPortPay.com> or call (770) 754 6000.  
Email questions to [Collections@healthport.com](mailto:Collections@healthport.com).

**Mailing and Billing Information Form**

**(Request Letter Attached)**

**Patient's Names:** Reny Rivero

**DOB:** 12/05/59 **REF#:**         

**SS#:**          **Claim/Case#:**         

**Mail to:**

**Name:** Reny Rivero

**Address:** 131 Silver Lake Road Apt 406

**City:** Staten Island **State:** NY **Zip:** 10301

**Attention:**         

**Bill to:(if different than mail to)**

**Name:**         

**Address:**         

**City:**          **State:**          **Zip:**         

**Attention:**



718 818 2048

5012 2561

By signing below, I am requesting that RUMC provide me with access to health information in the manner described above. This information may be redisclosed if the recipient(s) described on this form is not required by law to protect the privacy of the information, and such information is no longer protected by federal health information privacy regulations. I understand that I will be contacted if any fees for copies, a summary or explanation may be charged for fulfilling this request, and that I will have an opportunity to modify or withdraw my request if I do not want to pay those fees.

I understand that this authorization may be revoked in writing at any time, except to the extent that action has been taken in reliance on this authorization. Unless otherwise revoked, this authorization will expire automatically six months from date on which it is signed (or 60 days with respect to Drug or Alcohol Abuse records). You have a right to refuse to sign this authorization. Your health care, the payment for your health care and your health care benefits will not be affected if you do not sign this form.

Signature of Patient, if Minor, Signature of Parent or Legal Guardian

Relationship

Date

Signature of Witness

Date

**NOTICE TO RECIPIENT:** This information has been disclosed to you from records whose confidentiality is protected by State & Federal Law. State & Federal regulations prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is not sufficient for this purpose.

### **GENERAL INFORMATION**

1. If your request is relevant to continued care by another physician or hospital, we will be glad to copy the information and forward it (fax) directly to another physician or hospital of your choice.
2. This request must be notarized if it is not completed on the hospital premises.

#### **For RUMC Use Only:**

Date Received: (MO/DY/YR) \_\_\_\_/\_\_\_\_/\_\_\_\_

Disposition of Request: \_\_\_\_ GRANTED \_\_\_\_ DENIED \_\_\_\_ PARTIALLY DENIED

Patient Notified In Writing Of Response To Request On This Date: (MO/DY/YR) \_\_\_\_/\_\_\_\_/\_\_\_\_

Fee Charged For Fulfilling This Request (If applicable): \$ \_\_\_\_\_

Comments: \_\_\_\_\_

Name of Health Information Management/Medical Records Staff / Staff Member Processing This Request:

PRINT NAME

INITIALS

EXHIBIT F: porthealth 10.00 bill and payment



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Your request has been posted and is being processed.  
You will receive a confirmation email from us within the next 24 hours.

**Your HealthPort transaction ID for this payment is CC1544138.**  
Please reference this number if contacting Customer Service.

**The credit card confirmation number for this transaction is 3473135756550176056466.**

Thank you for using HealthPort Pay.

Invoice #	Patient Name	Invoice Balance	Payment Amount
0109311797	RIVERO RENY	\$10.50	\$10.50
	<b>Total</b>		<b>\$10.50</b>

**Print**

**[Return to HealthPort Pay home page](#)**



**Exhibit G confirmation invoice payment by email from  
Healthport**

Subject: Electronic Receipt CC1544138  
From: HealthPort Electronic Payment Service (donotreply@healthport.com)  
To: "clark0z1@yahoo.com"@elpermvgvm10.smartcorp.net;  
Date: Monday, September 10, 2012 7:47 PM

---

**Payment Approved**

---

Thank you for your payment.  
Please allow 24 hrs for the payment to post to your account.  
Transaction ID: CC1544138  
Payment Method: Visa  
Last 4 Digits: 6828  
Date: 10-SEP-2012 05:46:17  
Amount: \$10.50  
Approval Number: 064616

\*\*\*\*\*  
**Payment Details: Invoice Amount**

\*\*\*\*\*  
0109311797 \$10.50

Please note that a charge will appear on your Credit Card from  
HealthPort MEDICAL RECORDS.  
Please print this page for your records and refer to the invoice  
number if you need customer service assistance (770-360-1700).

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#####  
This e-mail message has been scanned for Viruses and Content and cleared  
by MailMarshal  
#####